!	COVERING BUE AUGUS COVERING BUE FEBRU	JULY 1 THROUG ARY 15 Y	OUGH TUNE: H DECEMBE eac 2002	30		Lo	FOR OF Postmark	FICE US	Number E ONLY
	Fill in Registration Nur Complete form and ret Baton Renge, LA 7080 This form must be de This form may be faxed	orn to the Board of Eth 18 (225) 763-8777 or	ises, 2415 Quail I		or,		1	10,23	52
1.	Name	Cha	rles	₩.				30 10	-0
	Last	Die 45kk setter	First		1000	MI			
2	Business Address_ Mailing Address	575 N. 8th S Street and No. Same as Abov		aton F	City	LA	70802 State	Zip	-
3.	Business Phone	225-343-343							
		Area Code and	Telephone Number		53				
4.	Total of all expenditures fro	tures made January m Schedules A and B)	through Jun	e 30:	\$	0.00			
5.	 Total of all expenditures made July 1 through December 31: \$_ (When Applicable) (Include expenditures from Schedules A and B) 					0.00			
6.	 Total of all expenditures made during calendar year: (Line 4 added with Line 5 should equal Line 6) 					0.00	· · · · · · · · · · · · · · · · · · ·	203FED 10	
7.	Did you make an ex	penditure exceedin	ig \$50 on one c	ccesion	for any	one legi	slator:	12	1922 271 1927 1987
	From January 1 throng From July 1 throng	ough June 30? h December 31?	Yes Yes		No No		NA	2: 69	NCE ON
	If the answer to eithe	r question in Numi	ber 7 above is "	YES, plea	ase com	plete Sc	hedule A an	d attach,	

LOBBYING EXPENDITURE REPORT



8.	Did you make expenditures exceeding	g the	sum of \$2	250 for any	y one le	gislator:	
	From January 1 through June 30? From July 1 through December 31?	8	Yes Yes	[3] [3]	No No		NA.
	If the answer to either question in Nu	mber	8 above i	is YES, ple	ease cor	nplete S	chedule A and attach.
9.	Did you expend funds for a reception, social gathering, or other function to which the entire legislature, either house, any standing committee, select committee, statutory committee, committee created by resolution of either house, subcommittee of any committee, recognized caucus, or any delegation thereof were invited during the reporting period?						
	☐ Yes			□ I	No		
	If the answer to Number 9 above is Y	ES,	please con	mplete Sch	edu l e E	3 and att	ach.
	CER	ПЕК	CATION	OF ACCU	RACY		
	I hereby certify that the information of information, and belief; that all rep information required by the Lobbyist omitted.	Ortal Disc	de expen	ditures ha	ve beer	include	ed herein; and that no

Feet 802. Rev. 10/02